



*Eaglehawk Dahlia and Arts Festival Inc*

Website [www.eaglehawkfestival.org.au](http://www.eaglehawkfestival.org.au)

Tel: 0447 473 674

ABN 61 068 304 369

PO Box 21 Eaglehawk 3556

## **INJURY INCIDENT REPORT FORM**

DATE:

TIME OF INJURY:

NAME:

GENDER: MALE/FEMALE

HOME ADDRESS:

HOME PHONE NO. :

MOBILE NO.:

EMAIL ADDRESS:

DATE OF BIRTH:

LOCATION OF INCIDENT:

WITNESS NAME:

WITNESS PHONE NO:

**DESCRIPTION OF INJURIES:**

**DESCRIPTION OF INCIDENT:**

**CASUALTY REFERRED TO:**

ON SITE FIRST AID

AMBULANCE

HOSPITAL

DOCTOR

OTHER

Name of person filling out this form and Contact details:



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